

DEC 17 2004

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Transmittal Form (to be used for all correspondence after initial filing)

Patent Number	US 6 803,007 B2
Issue Date	October 12, 2004
First Named Inventor	Mario Meggiorini
Application Number	10/073,407
Filing Date	February 13, 2002
Attorney Docket Number	CAM3-PT040
Total Number of Pages in This Submission	

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Cert of Corr and Form PTO/SB/44.
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Firm Name	VOLPE AND KOENIG, P.C.		
Signature			
Printed name	Dimitri P. Dovas		
Date	12-17-04	Reg. No.	51,627

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being sent Via Facsimile (703-872-9306) addressed to: Examiner Stefan Staicovici, Group Art Unit 1732, on the date shown below:

Signature			
Typed or printed name	Dimitri P. Dovas	Date	12-17-04

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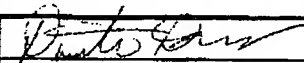
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Effective on 12/08/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4281). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number: 10/073,407 Filing Date: February 13, 2002 First Named Inventor: Mario Meggiolan Examiner Name: Stefan Staicovici Art Unit: 1732 Attorney Docket No.: CAM3-PT040	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 100.00			

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							Small Entity Fee (\$) Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							50 25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							200 100
Multiple dependent claims							360 180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		Fee (\$) Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20				0.00			0.00
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
HP = highest number of independent claims paid for, if greater than 3				0.00			
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
- 100 =		/ 50 =	(round up to a whole number) x		=	0.00	
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other: Request for Certificate of Correction						100.00	

SUBMITTED BY			
Signature: 	Registration No. 51,627 (Attorney/Agent)	Telephone 215-568-6400	
Name (Print/Type): Dimitri P. Dovas		Date: 12-17-2004	

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DEC 17 2004

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT** of:

Mario Meggiolan

Patent No.: US 6,803,007 B2**Issued:** October 12, 2004**Appln. No.:** 10/073,407**Filed:** February 13, 2002**Our File:** CAM3-PT040**Date:** December 17, 2004

For: METHOD FOR PRODUCING A
CONNECTOR ELEMENT FOR
CONNECTING FRAME PARTS AT A JOINT
LOCATION IN A BICYCLE FRAMEWORK
AND CONNECTOR ELEMENT OBTAINED
THEREBY

REQUEST FOR CERTIFICATE OF CORRECTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

A Certificate of Correction under 35 U.S.C. §§ 254, 255 and 37 C.F.R. §§1.322,
1.323 is requested for U.S. Patent No. 6,803,007 B2. Correction of the following errors
is requested.

12/20/2004 AWONDAF1 00000092 6803007

01 FC:1811

100.00 OP

IN THE SPECIFICATION

At column 2, line 15, after the first instance of the word "hours", delete "from 30
minutes to three hours".

Patentec: Mario Meggiolan
Patent No.: US 6,803,007 B2

IN THE CLAIMS

In claim 9, column 6, line 24, after the word "exceeding", delete " $15 \times 10^{-5} \text{ mm}/^{\circ} \text{C}$." and insert therefor $--15 \times 10^{-5} \text{ mm}/^{\circ} \text{C}--$.

In claim 20, column 6, line 64, after the word "additional", delete "stripe" and insert therefor $--strips--$.

REMARKS

Patentee believes that the above errors are of such a nature as to justify the issuance of a Certificate of Correction. Patentee has enclosed a completed Certificate of Correction Form PTO/SB/44.


Since at least one of the errors was caused by Applicant, payment of the surcharge fee of \$100.00 (Form PTO-2038) is enclosed.

Patentee respectfully requests that the Certificate of Correction be issued.

Patentee: Mario Meggiolan
Patent No.: US 6,803,007 B2

Respectfully submitted,

Mario Meggiolan

By 
Dimitri P. Dovas
Registration No. 51,627
(215) 568-6400

Volpe and Koenig, P.C.
United Plaza, Suite 1600
30 South 17th Street
Philadelphia, PA 19103

DPD/WCP

DEC 17 2004

PTO 5844 (04-04)

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(Pat. Form PTO-1050)UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTION Page 1 of 1

PATENT NO. : US 6,803,007 B2

DATED : October 12, 2004

INVENTOR(S) : Mario Meggiolan

It is certified that error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

IN THE SPECIFICATION

At column 2, line 15, after the first instance of the word "hours", delete "from 30 minutes to three hours".

IN THE CLAIMS

In claim 9, column 6, line 24, after the word "exceeding", delete " $15 \times 10^{-5} \text{ mm/}^{\circ} \text{C.}$ " and insert therefor $--15 \times 10^{-5} \text{ mm/}^{\circ} \text{C.}--$.

In claim 20, column 6, line 64, after the word "additional", delete "stripe" and insert therefor $--strips--$.

MAILING ADDRESS OF SENDER:

PATENT NO.

US 6,803,007 B2

Volpe and Koenig, P.C.
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30 South 17th Street
Philadelphia, PA 19103

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